

Screening MDEs

Item	Name	Column Start	Width	Type	Codes/Comments	Edit Checks/Skip Patterns
1. Screening Location						
a	State/Tribal FIPS Code	1	2	Numeric	Numeric FIPS Code, Use leading zeros (i.e. 06 = California, 85 = Southeast Alaska, 92 = Southcentral Alaska)	NBCCEDP Valid FIPS code for your state
b	Reserved	3	2		This space reserved for future use	
c	County	5	3	Numeric	FIPS Code, Use leading zeros.	NBCCEDP Valid codes for your program. This is the county of the primary screening provider.
d	City	8	15	Character	Left Justify	NBCCEDP This is the city of the primary screening provider
e	Enrollment Site ID	23	5	Numeric	Use leading zeros. This should be the point of enrollment of the woman to the program. (The intent is to identify the center that is administratively responsible for the care and tracking of a woman).	NBCCEDP Valid codes for your sites
f	Intervention Type	28	1	Character	U=Usual Care, E=Enhanced Intervention	1 digit Character (U or E) identifying whether the woman is part of the usual or enhanced intervention, skip for standard projects
2. Record Identification						
a	Unique Screening Record ID number	29	6	Character	Left Justify. The record ID number should be unique and constant in order to track records over time.	6 digit Character
b	Record Type	35	1	Numeric	0. Delete: a record 1. Add: a record 2. Update: the entire record 3. Update: the screening location, patient demographic information, screening data 4. Update i diagnostic data	NBCCEDP Range check. If submitting the entire data set from the beginning of the program, then this field should be coded as 2.
c	Disposition Status	36	1	Numeric	1. Open 2. Closed	Identifies partial completion of records.
3. Patient Information						
a	Unique Patient ID number	37	15	Character	Left Justify. If social security number is used, encode it. One simple method is to rearrange the order of the 9 digits. The ID number should be unique and constant for each patient in order to track the patient over time. Wisewoman will use the same NBCCEDP ID Number.	NBCCEDP Patient ID number preferred
b	County of Residence	52	3	Numeric	FIPS Code, Use leading zeros, (if unknown, blank fill.) Not required if ZIP code of residence is supplied.	NBCCEDP Valid FIPS code for the county
c	ZIP Code of Residence	55	5	Numeric	Use leading zeros, (if unknown, blank fill.) Not required if County of residence is supplied.	NBCCEDP Valid ZIP code for the state
d	Date of Birth	60	8	Numeric	MMDDYYYY, (i.e. Jan 3, 1942 = 01031942 If unknown, blank fill.)	NBCCEDP Check for validity, i.e. no one too old or too young at date of enrollment.
e	Race1	68	1	Numeric	1. White 2. Black or African American 3. Asian 4. Native Hawaiian or Other Pacific Islander 5. American Indian or Alaska Native 6. Unknown	Range check. This race field should be populated first. If a woman self identifies more than one race, then each race identified should be reported in a separate race field.
f	Race2	69	1	Numeric	1. White 2. Black or African American 3. Asian 4. Native Hawaiian or Other Pacific Islander 5. American Indian or Alaska Native 6. Unknown	This field should be left blank, unless the woman reports more than one race.
g	Race3	70	1	Numeric	1. White 2. Black or African American 3. Asian 4. Native Hawaiian or Other Pacific Islander 5. American Indian or Alaska Native 6. Unknown	This field should be left blank, unless the woman reports more than two races.
h	Race4	71	1	Numeric	1. White 2. Black or African American 3. Asian 4. Native Hawaiian or Other Pacific Islander 5. American Indian or Alaska Native 6. Unknown	This field should be left blank, unless the woman reports more than three races.
i	Race5	72	1	Numeric	1. White 2. Black or African American 3. Asian 4. Native Hawaiian or Other Pacific Islander 5. American Indian or Alaska Native 6. Unknown	This field should be left blank, unless the woman reports more than four races.
j	Race6	73	1	Numeric	1. White 2. Black or African American 3. Asian 4. Native Hawaiian or Other Pacific Islander 5. American Indian or Alaska Native 6. Unknown	This field should be left blank, unless the woman reports more than five races.
k	Hispanic or Latino Origin	74	1	Numeric	1. Yes 2. No 3. Unknown	type = Numeric, Range Check
l	Education (highest grade completed)	75	2	Numeric	1. < 9th 2. Some high school 3. High school grad or equivalent 4. Some college or higher 88 refused 99 unknown	type = Numeric, Range Check
m	Date of first WW Screening	77	8	Numeric	MMDDYYYY	Only necessary if data for first ever WW screening is not included in the updated record or records previously sent to RTI. Otherwise leave blank.
n	Current Screening Date	85	8	Numeric	MMDDYYYY	type = Numeric, Range Check
4. Screening Information: Anthropometrics						
a	Height	93	3	Numeric	Use leading zeros	type = Numeric, Range Check
b	Height Unit	96	1	Numeric	1. Inches 2. Centimeters	type = Numeric, Range Check
c	Weight	97	3	Numeric	Use leading zeros	type = Numeric, Range Check
d	Weight Unit	100	1	Numeric	1. lbs 2. kg	type = Numeric, Range Check
5. Screening Information: Blood Pressure						
a	Systolic #1, mm Hg	101	3	Numeric	Use leading zeros	type = Numeric, Range Check
b	Diastolic #1, mm Hg	104	3	Numeric	Use leading zeros	type = Numeric, Range Check
c	Systolic #2, mm Hg	107	3	Numeric	Use leading zeros	type = Numeric, Range Check
d	Diastolic #2, mm Hg	110	3	Numeric	Use leading zeros	type = Numeric, Range Check
6. Screening Information: Blood Lipids						
a	Total Cholesterol, mg/dl	113	3	Numeric	Use leading zeros	type = Numeric, Range Check
b	HDL Cholesterol, mg/dl	116	3	Numeric	Use leading zeros	type = Numeric, Range Check
c	Fasting Status, (8 hrs)	119	1	Numeric	1. Yes 2. No 3. Don't know	type = Numeric, Range Check
7. Screening Information: Health History						
a	Have you ever been told by a doctor, nurse or other health professional that your blood cholesterol is high?	120	1	Numeric	1. Yes 2. No 3. Don't Know	type = Numeric, Range Check
b	Have you ever been told by a doctor, nurse or other health professional that you have high blood pressure?	121	1	Numeric	1. Yes 2. No 3. Don't Know	type = Numeric, Range Check
c	Have you ever been told by a doctor, nurse or other health professional that you have diabetes?	122	1	Numeric	1. Yes 2. No 3. Don't Know	type = Numeric, Range Check
8. Screening Information: Medication/Tobacco Status						
a	Are you currently taking medication for high cholesterol?	123	1	Numeric	1. Yes 2. No 3. Don't Know	type = Numeric, Range Check
b	Are you currently taking medication for high blood pressure?	124	1	Numeric	1. Yes 2. No 3. Don't Know	type = Numeric, Range Check
c	Are you currently taking medication for diabetes?	125	1	Numeric	1. Yes 2. No 3. Don't Know	type = Numeric, Range Check
d	Do you now smoke cigarettes?	126	1	Numeric	1. Everyday 2. Some days 3. Not at all 4. Don't Know	type = Numeric, Range Check
Program Specific Data Elements - Needs to be completed Separately for each State/Tribe						
a		127				